

U.S. APPLICATION NO. 107524772		INTERNATIONAL APPLN. NO. PCT/FR2003/002536		ATTORNEY DOCKET NO. 0501-1122	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. <input checked="" type="checkbox"/> The following fees are submitted: <p style="text-align: center;">PCT FEES - NATIONAL STAGE</p>				CALCULATIONS PTO USE ONLY	
<u>Fee Description</u>					
Basic National Stage Fee				\$150.00	
No Search Provided National Stage Search Fee				\$250.00	
<input type="checkbox"/> US was the IPEA And all claims satisfied the provisions of PCT Article 33 (1)-(4) National Stage Examination Fee				\$100.00	
Surcharge of \$130.00 for furnishing the oath or declaration later than <input type="checkbox"/> 20- <input type="checkbox"/> 30 months from the earliest claimed priority date (Fee Code 1617/2617)				\$0.00	
National Stage Application size fee each additional 50 sheets in excess of 100 Fee Code 1681/2681		Additional Sheets $38 - 100 = \underline{\quad 50 \quad} = \underline{\quad \quad} \times$		Fee From Below \$125.00	\$0.00
CLAIMS		NUMBER FILED	NUMBER EXTRA	RATE	
Independent Claims Fee Codes 1614 / 2614		2 - 3 =		x \$100.00	\$0.00
Total Claims Fee Codes 1615 / 2615		43 - 20 =	23	x \$25.00	\$575.00
MULTIPLE DEPENDENT CLAIM(S) (if applicable) Fee Code 1616 / 2616				+ \$360.00	\$0.00
Processing fee of \$130.00 for furnishing the English translation later than <input type="checkbox"/> 20 <input type="checkbox"/> 30 months from the earliest claimed priority date (37 CFR 1.492(f)). Fee Code 1618					\$0.00
Fee for recording the enclosed assignment (37 CFR 1.21(h)). (Fee code 8021) \$40.00 per property +					\$0.00
TOTAL FEES ENCLOSED =				\$1075.00	
				Amount to be refunded:	\$
				Charged:	\$
<input checked="" type="checkbox"/> A check in the amount of \$1075.00 to cover the above fees is attached. <input type="checkbox"/> The Director is hereby authorized to charge indicated fees and credit any overpayment to Deposit Account No. 25-0120 in the name of Young & Thompson. A duplicate copy of this sheet is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized in this, concurrent, and future replies, to charge payment or credit any overpayment to Deposit Account No. 25-0120 for any additional fee required under 37 C.F.R. §§ 1.16 or 1.17.					
SEND ALL CORRESPONDENCE TO: YOUNG & THOMPSON 745 South 23 rd Street Arlington, VA 22202 Telephone: (703) 521-2297 Facsimile: (703) 685-0573 Y&T Customer No. 00466 BC/yr					
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> </div> <div style="width: 50%;"> <p style="text-align: center;"><i>Benoit Castel</i> SIGNATURE</p> <p style="text-align: center;">Benoit Castel, Reg. No. 35,041 NAME, REGISTRATION NUMBER</p> <p style="text-align: center;">February 16, 2005 DATE</p> </div> </div>					

BEST AVAILABLE COPY

 Repln. Ref: 02/24/2005 CALVARAD 0020505500
 DAD:230120 Name/Number:10524772
 FC: 9204 \$50.00 CR